

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

[illegible]

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

[illegible]

☐ 1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxic (D000)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

William E. Rome

William E. Rome
Vice President of Textiles

10-12-90

EPA Form 8700-12 (Rev. 10-88) Previous edition is obsolete.

State Of North Carolina

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF SOLID WASTE MANAGEMENT
P.O. BOX 27687 RALEIGH, NC 27611-7687

G

19

May 6, 1991

ASHEVILLE DYEING & FINISHING
PO BOX 337
SWANNANOA, NC 28778

RE: EPA ID No. NCD070619663

Dear Sir:

Listed above is your EPA ID number which has been assigned by the EPA. As a Small Generator, you should be familiar with N.C. Hazardous Waste Management Regulations 10 NCAF 10F .0002 Definitions; contained in 40 CFR 260.10 (Subpart B), 10 NCAF 10F .0029 Identification and Listings of Hazardous Waste; contained in 40 CFR 261.1 (Subpart A-D) and 10 NCAF 10 F .0030 Standards for Hazardous Waste Generations; contained in 40 CFR 262.10 - 262.40 (Subpart A-D).

If you wish to obtain a copy of the actual regulations, you may do so by contacting the Hazardous Waste Section, Division of Solid Waste Management, P.O. Box 27687, Raleigh, NC 27611-7687. To cover the cost of printing, a fee of \$16.00 is charged for a copy of the regulations.

NCSU provides a training program for small generators which you may want to attend. The Department has a contract with NCSU to conduct training for small generators. Call Linda Watkins at (919) 737-3002 for a flyer describing the workshops in your area.

The Hazardous Waste Section contains a Technical Assistant Unit which is available to answer questions. The Unit can be reached by contact the Section Office at (919) 733-2178.

Sincerely,

R.J. Edwards, Administrative Officer
Technical Assistance Unit
Hazardous Waste Section
Division of Solid Waste Management

cc: ROBIN PURCELL

Attachment

State Of North Carolina

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF SOLID WASTE MANAGEMENT
P.O. BOX 27687 RALEIGH, NC 27611-7687

G

May 6, 1991

ASHEVILLE DYEING & FINISHING
PO BOX 337
SWANNANDA, NC 28778

RE: EPA ID No. NCD070619663

Dear Sir:

Listed above is your EPA ID number which has been assigned by the EPA. As a TSD facility (Treater, Storer and/or Disposer), you should be familiar with North Carolina Hazardous Waste Management, Regulation 10 NCAC 10F .0002 Definitions, contained in 40 CFR 260; 10 NCAC 10F .0029 Identification and Listing of Hazardous Waste, contained in 40 CFR 261; 10 NCAC 10F .0032 Standards for owners/operators of HWMF's, contained in 40 CFR 264; 10 NCAC 10F .0035 Permitting Procedures, contained in 40 CFR 124; 10 NCAC 10F .0037 Annual Reports; 10 NCAC 10F .0039 Recyclable Materials, contained in 40 CFR 265; 10 NCDC 10F .0042 Land Disposal Restrictions, contained in 40 CFR 268; G.S. 130A-17-130A-28; contained in Article 1 Part 2 of the N.C. Solid Waste Management Law and G.S. 130A-290, 292, 293, 294.1 and 295.

Effective January 1, 1986, all handlers of hazardous waste were required by G.S. 130A-294.1 to pay an annual fee. The above rules were adopted November 13, 1985 as authorized by G.S. 130A-294(a)(7) which was ratified July 3, 1985.

The annual fee for this year is due within 30 days of the date of this notification. The amount of your fee is included on the attached invoice. Checks should be made payable to the Division of Solid Waste Management and mailed to R.J. Edwards, Hazardous Waste Section, P.O. Box 27687, Raleigh, North Carolina 27611-7687, courier 52-01-00

The Hazardous Waste Section contains a Technical Assistance Unit which is available to answer questions. The Unit can be reached by contacting the Section Office at (919) 733-2178.

NCSU provides a training program for generators which you may want to attend. To receive a brochure on RCRA training programs, please contact Dora Shell or Pat Hillsgrove (919) 737-2261 at NCSU Division of Lifelong Education, Box 7401, Raleigh, North Carolina 27695-7401.



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State of North Carolina
Department of Environment, Health, and Natural Resources
Division of Solid Waste Management
P.O. Box 27687 · Raleigh, North Carolina 27611-7687

James G. Martin, Governor
William W. Cobey, Jr., Secretary

William L. Meyer
Director

October 10, 1991

ASHEVILLE DYEING & FINISHING
PO BOX 337
SWANNANOA NC 28778

RE: EPA ID No.: NCD070619663

Dear Sir:

Based on information received by this office for the site identified with the above EPA ID number, the State has accepted and processed the change in RCRA classification or information for the above listed site.

Your EPA ID number is active.

Current computer record of your facility contains following information:

(X Indicates Operational Status of Your Facility)

- LARGE GENERATOR	X SMALL QNTY. GENERATOR
- TRANSPORTER	- TREATER
- STORER	X DISPOSER

Company Name:	ASHEVILLE DYEING & FINISHING
Owner:	WINSTON MILLS INC
Owner Address:	PO BOX 337
City, St.& ZIP:	SWANNANOA NC 28778
Contact:	PEGG STEVE
Phone Number:	(704)298-2280
Location Addr.:	WARREN WILSON COLLEGE RD.
City, St.& ZIP:	SWANNANOA NC 28778

(please turn over)

Please verify the computer information on front page. Please notify us of any corrections.

We are advising EPA of the change. Please notify us if there is any further change in your operations which would affect your status, namely Company's Name, Owner, Location, Mailing Address, Contact Person, and/or Telephone No. Your EPA ID number is currently active.

Sincerely,

A handwritten signature in cursive script, appearing to read "R.J. Edwards".

R.J. Edwards, Administrative Officer
Waste Management Branch
Hazardous Waste Management Section
Division of Solid Waste Management

CC: SPRING ALLEN

State of North Carolina
Department of Environment,
Health and Natural Resources
Division of Solid Waste Management

James B. Hunt, Jr., Governor
Jonathan B. Howes, Secretary
William L. Meyer, Director



(28)

October 13, 1995

ASHEVILLE DYEING & FINISHING
PO BOX 337
SWANNANOA NC 28778

RE: EPA ID No.: NCD070619663

Dear Sir:

Based on information received by this office for the site identified with the above EPA ID number, the State has accepted and processed the change in RCRA classification or information for the above listed site.

Your EPA ID number is active.

Current computer record of your facility contains following information:

(X Indicates Operational Status of Your Facility)

- LARGE GENERATOR	X SMALL QNTY. GENERATOR
- TRANSPORTER	- TREATER
- STORER	X DISPOSER

Company Name:	ASHEVILLE DYEING & FINISHING	
Owner:	ANVIL KNITWEAR INC	
Owner Address:	PO BOX 367	
City, St.& ZIP:	SWANNANOA	NC 28778
Contact:	PEGG	STEVE
Phone Number:	(704)298-2280	
Location Addr.:	850 WARREN WILSON COLLEGE RD	
City, St.& ZIP:	SWANNANOA	NC 28778

Please verify the above computer information. Please notify us of any corrections.

We are advising EPA of the change. Please notify us if there is any further change in your operations which would affect your status, namely Company's Name, Ownership, Address, Contact, or Telephone.

Your EPA ID number is currently active.

Sincerely,

R.J. Edwards, Administrative Officer

P.O. Box 27687, Raleigh, North Carolina 27611-7687 Telephone 919/855-2000 or 919/855-153605

An Equal Opportunity Affirmative Action Employer

50% recycled/ 10% post-consumer paper

CC: SPRING ALLEN

Please refer to the instructions for filling this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

SEP 6

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐ A. First Notification ☒ B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

N C D 0 7 0 6 1 9 6 6 3

II. Name of Installation (Include company and specific site name)

A s h e y i l l e D y e i n g & F i n i s h i n g

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

8 5 0 W a r r e n W i l s o n C o l l e g e R o a d

Street (Continued)

City or Town

S w a n n a n o a

State

N C

Zip Code

2 8 7 7 8 -

County Code

0 2 1

County Name

B u n c o m b e

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

P O B o x 3 3 7

City or Town

S w a n n a n o a

State

N C

Zip Code

2 8 7 7 8 -

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

P e g g

(First)

S t e v e

Job Title

D i r . E m p R e l a t i o n s

Phone Number (Area Code and Number)

7 0 4 - 2 9 8 - 2 2 8 0

VI. Installation Contact Address (See Instructions)

A. Contact Address

Location Mailing Other

☐ ☒ ☐

B. Street or P.O. Box

P O B o x 3 6 7

City or Town

S w a n n a n o a

State

N C

Zip Code

2 8 7 7 8 -

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

A n v i l K n i t w e a r , I n c .

Street, P.O. Box, or Route Number

P O B o x 3 6 7

City or Town

S w a n n a n o a

State

N C

Zip Code

2 8 7 7 8 -

Phone Number (Area Code and Number)

7 0 4 - 2 9 8 - 2 2 8 0

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes X

No

(Date Changed)

Month Day Year
0 1 2 8 9 5

10 - For Official Use Only

A. Hazardous Waste Activity		B. Used Oil Recycling Activities	
<input type="checkbox"/> 1. Generator (See Instructions) <input type="checkbox"/> a. Greater than 1000kg/mo (2,200 lbs.) <input type="checkbox"/> b. 100 to 1000 kg/mo (200-2,200 lbs.) <input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.) <input type="checkbox"/> 2. Transporter (Indicate Mode in boxes 1-5 below) <input type="checkbox"/> a. For own waste only <input type="checkbox"/> b. For commercial purposes Mode of Transportation <input type="checkbox"/> 1. Air <input type="checkbox"/> 2. Rail <input type="checkbox"/> 3. Highway <input type="checkbox"/> 4. Water <input type="checkbox"/> 5. Other - specify _____	<input checked="" type="checkbox"/> 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions. <input type="checkbox"/> 4. Hazardous Waste Fuel <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketers <input type="checkbox"/> c. Boiler and/or Industrial Furnace <input type="checkbox"/> 1. Smelter/Detrital <input type="checkbox"/> 2. Small Quantity Exemption Indicate Type of Combustion Device(s) <input type="checkbox"/> 1. Utility Boiler <input type="checkbox"/> 2. Industrial Boiler <input type="checkbox"/> 3. Industrial Furnace <input type="checkbox"/> 5. Underground Injection Control	<input type="checkbox"/> 1. Used Oil Fuel Marketer <input type="checkbox"/> a. Marketer Directs Shipment of Used Oil to Off-Specification Burner <input type="checkbox"/> b. Marketer Who First Claims the Used Oil Meets the Specifications <input type="checkbox"/> 2. Used Oil Burner - Indicate Type(s) of Combustion Device(s) <input type="checkbox"/> a. Utility Boiler <input type="checkbox"/> b. Industrial Boiler <input type="checkbox"/> c. Industrial Furnace <input type="checkbox"/> 3. Used Oil Transporter - Indicate Type(s) of Activity(ies) <input type="checkbox"/> a. Transporter <input type="checkbox"/> b. Transfer Facility <input type="checkbox"/> 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies) <input type="checkbox"/> a. Process <input type="checkbox"/> b. Re-refine	

[illegible]

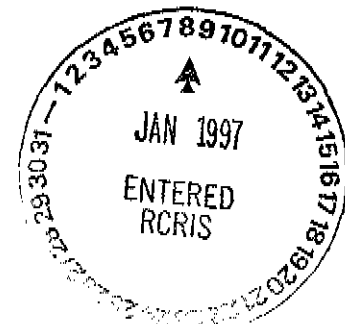
1	2	3	4	5	6

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Steve D. Pegg	Steve D. Pegg Dir. Emp. Relations	08-25-95
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[illegible]

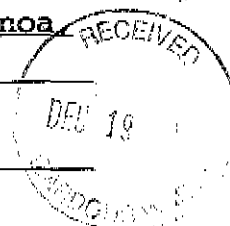
1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.



RCRIS

EPA ID#: NCD 070619663

Facility name: Asheville Dyeing & Finishing City: Swannanoa
NC



Evaluation data:

New: ☒ Change: Delete:

Person: 063 Branch: 01

Agency: S Reason:

Supervisor NOV Tracking Info

Type: CEI

Initial Inspection Date: 20 Nov 1996

Docket Number:

Reinsptdate:

COMMENTS: no violations noted

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GENERATORS

GER: GRR: GLB: GMR: GOR:

GPT: GSQ:

TRANSPORTERS

TGR: TMR: TOR: TRR: TWD:

USED OIL

TUO: TFO: BUO: MUO: PUO:

RUO:

TSD'S

DBF: DCH: DCL: ☒ DCP: ☒ DFR: ☒ DGS: ☒ DGW: ☒ DIN: DLB:

☒ DLF: DLT: DMC: DMR: ☒ DOR: ☒ DOT:

DPB: ☒ DPF: ☒ DSI: DTR: DTT: DWP:

VIOLATION DATA: New: ☒ Change: Delete:

- Agency: S Type: date determined: 20 Nov 1996
class: Priority: Seq.#
Return to compliance:
Actual date:
Reg Description:
Comment:
- Agency: S Type: date determined: 20 Nov 1996
class: Priority: Seq.#
Return to compliance:
Actual date:
Reg Description:
Comment:

RCRA INSPECTION REPORT

1. FACILITY INFORMATION Asheville Dyeing & Finishing
950 Warren Wilson College Rd.
Swannanoa, NC 28778
NCD 070619663 TSDF
2. FACILITY CONTACT Steve Pegg
704-298-2280
3. SURVEY PARTICIPANTS Steve Pegg, John Luther, SA
4. DATE OF INSPECTION 20 Nov 1996
5. PURPOSE OF INSPECTION To determine compliance with 40 CFR 262,
265, & 268.
6. FACILITY DESCRIPTION
Facility is a finishing plant for cotton blend fabric.
7. TYPE WASTE

8. AREAS OF INSPECTION

- (Yes = compliance, no = violation, na = not applicable)
- Emergency Preparedness: yes
 - Inspection Records: NA
 - Contingency Plan: yes
 - Training Records: yes
 - Manifests/LDR: yes
 - 90/180 day storage areas: NA
 - Satellite Accumulation Area: NA
 - External facility condition: very good
 - Other HW units: NA
 - Recommendations: None

9. Waste Minimization

Facility has replaced all parts washer fluid with non HW fluids and no longer generates HW from operations. GW remediation group is involved in the GW cleanup operations at the site. Contact for HWS GW activities is Grey Stephens.

10. SITE DEFICIENCIES:
IN COMPLIANCE

Reg description7 *comment7*

Reg description8 *comment8*

[Signature]
INSPECTOR

20NOV96
DATE

[Signature]
FACILITY CONTACT